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Michael L Goldn Nixon Peabody LI Clinton Square P O Box 31051	.P			<u>a</u>	hereby certify that to states Postal Service ddressed to the Ma	rtificate of Mailing of his Fee(s) Transmitta with sufficient postagil Stop ISSUE FEE PTO (703) 746-4000,	l is being se for firs address	deposited with the United t class mail in an envelope above, or being facsimile
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	01 FC:2501			5.00 OF	Janie	Bowers		(Signature)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVEN			OR	ATTORNEY DOCKI	ET NO.	CONFIRMATION NO.
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Number is required.	·		listed, no r	name will	be printed.	<del></del>	-	
	RESIDENCE DATA TO B				•• •	, ., ., .		
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(A) NAME OF ASSIGN	EE	. (B	) RESIDENC	CE: (CITY	and STATE OR CO	UNTRY)		
Cornell Rese	arch Foundation	n, Inc.	Ithac	ca, N	ď			
Please check the appropriate	e assignee category or catego	ries (will not be pri	inted on the p	atent):	individual A	corporation or other n	rivate gro	oup entity

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The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 14-1138 (enclose an extra copy of this form). Publication Fee (No small entity discount permitted) Advance Order - # of Copies \_

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

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□ b. Applicant is not claiming SMALL ENTITY status. Sec, e.g., 37 CFR 1.27(g)(2).

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(Authorited Signature Reg. No. 40,087 September 30

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